GFSA End of Summer Bash 2018 Registration Form

Team Name _____ Location (City) _____ 8U ☐ 10U ☐ 12U ☐

Coach _____ Phone _____ Email _____

Fee $325 _____ ($30 fee will be assessed for returned checks)

Mail completed form with fee to: GFSA Attn: Shannon/End of Summer PO Box 565, Greenfield IN 46140

*****Proof of team insurance and player birth certificates are required in the event of a dispute/inquiry.**

Player	Birth Date	Phone #	Parent Name	Emergency Contact #